



BRIAN SANDOVAL
Governor

STATE OF NEVADA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH CARE FINANCING AND POLICY

1100 E. William Street, Suite 101
Carson City, Nevada 89701
(775) 684-3600

ROMAINE GILLILAND
Director

LAURIE SQUARTSOFF
Administrator

Division of Health Care Financing and Policy
Notice of meeting to solicit public comments and intent to act Upon Amendments to
the Nevada Medicaid Operations (NMO) Forms, Nevada Medicaid HIPAA (NMH) Forms
and to the Medicaid Services Manual (MSM)

Public Hearing October 9, 2014

Minutes

Date and Time of Meeting: October 9, 2014 at 9:15 AM, after the conclusion of the State Plan Public Hearing

Name of Organization: The State of Nevada, Department of Health and Human Services, Division of Health Care Financing and Policy (DHCFP)

Place of Meeting: State of Nevada Legislative Building
401 So. Carson Street, Room 2135
Carson City, Nevada 89701

Place of Video Conference: Grant Sawyer Office Building
555 E. Washington Avenue, Suite 4412
Las Vegas, Nevada 89101

Attendees

In Carson City, NV

Jennifer Frischmann, DHCFP
Alexis Tucey, DHCFP
Kim Riggs, DHCFP
Carl Jeffery, Catamaran
Christina Buxton, CVMC
Coleen Lawrence, DHCFP
Michele Belkin, DHCFP
Michael Bowman, Eligibility Solutions
Lynne Foster, DHCFP
Dwight Hansen, NV Hosp. Assn.
Mary Fernandez, Renown
Tammy Moffitt, DHCFP

Nova Murray, DWSS
Hilary Jones, DHCFP
Scott Mayne, Washoe County/Clark County
Billie Kale, CVMC
Betsy Aiello, DHCFP
Mary Griffith, DHCFP
Jenni Bonk, DHCFP
Aubrey Straub, Eligibility Solutions
Joanna Jacob, Ferrari Public Affairs
Bethany Sexton, Renown
Pam Calvert, Renown
Darrell Faircloth, DAG

In Las Vegas, NV

Dan Musgrove, Amerigroup
Tyler Owen, Sunrise HCA
Lisa Betts, MedImmune
Charlene Frost, NVPEP
Shannon Groppenbacher, Johnson & Johnson
Renee Nemchek, UMC

Debra Ferber, DWSS
Dana Lunde
Dev Vinson, MedImmune
Jarred Nelson, RCA
Amanda Haboush-Deloy, MCRP

Introduction:

Ms. Tammy Moffitt, Chief of Program Integrity, Division of Health Care Financing and Policy (DHCFP), opened the Public Hearing introducing herself, Ms. Betsy Aiello, Deputy Administrator of the DHCFP and Mr. Darrell Faircloth, Senior Deputy Attorney General (DAG).

Ms. Moffitt – The notice for this public hearing was published on September 5, 2014 in accordance with the Nevada Revised Statute 422.2369.

1. Discussion and proposed adoption of the new Katie Beckett Disability Determination Notice of Decision (NOD) Form

Ms. Jennifer Frischmann:

Federal regulations require that recipients must receive notification whenever an adverse decision is taken against them. An adverse decision is defined as a denial, termination, suspension or reduction of services.

This form is used by the DHCFP staff to provide notice to Medicaid recipients and/or their representative when an adverse decision has been made in regards to their Katie Beckett Disability Determination and informing the recipient of their Fair Hearing Rights.

The effective date is November 1, 2014.

At the conclusion of Ms. Frischmann's presentation, Ms. Moffitt asked Ms. Aiello, Deputy Administrator, and Mr. Faircloth, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Mr. Faircloth's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Moffitt – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted.

Ms. Moffitt – Closed the Public Hearing for the Katie Beckett Disability Determination Notice of Decision (NOD) Form.

2. Discussion and proposed adoption of changes to the Pharmacy Lock-In Notice of Decision Form

Ms. Lynne Foster:

In accordance with 42 CFR 431.54(e) and Medicaid Services Manual Chapter 1200, Section 1203.1B(2.)(e.), this Notice of Decision (NOD) serves to advise recipient(s) of their placement in Nevada Medicaid's Lock-In Program for pharmacy services. This document informs the recipient of their initial assigned lock-in pharmacy, its location and how to change the assigned pharmacy. It also informs and instructs the recipient of their rights to request a fair hearing.

Please note, the original posted citation to Medicaid Services Manual Chapter 1200 was incorrect, the correct citation was read in as above, Section 1203.1B(2.)(e.).

The effective date is November 1, 2014.

At the conclusion of Ms. Foster's presentation, Ms. Moffitt asked Ms. Aiello, Deputy Administrator, and Mr. Faircloth, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Mr. Faircloth's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Moffitt – Recommended the Deputy Administrator approve as amended with corrected citation of Section 1203.1B(2.)(e.).

Ms. Aiello – Approved as amended with corrected citation.

Ms. Moffitt – Closed the Public Hearing for the Pharmacy Lock-In Notice of Decision Form.

3. Discussion and proposed adoption of form NMH-3827: Advance Directives Compliance Self-Evaluation & Certification Form

Ms. Lynne Foster:

The DHCFP serves as a Civil Rights oversight agency on behalf of the U.S. Department of Health & Human Services, Office for Civil Rights and the Centers for Medicare and Medicaid Services (CMS). In this capacity, the DHCFP assures that certain entities comply with the Patient Self-Determination Act of 1990. This form is used by hospitals, nursing facilities, home health agencies, personal care attendant providers, and hospices that received funding for Medicare or Medicaid for the triennial self-evaluation of compliance to advance directive regulations.

The effective date is November 1, 2014.

At the conclusion of Ms. Foster's presentation, Ms. Moffitt asked Ms. Aiello, Deputy Administrator, and Mr. Faircloth, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Mr. Faircloth's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Moffitt – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted.

Ms. Moffitt – Closed the Public Hearing for the form NMH-3827: Advance Directives Compliance Self-Evaluation & Certification Form.

4. Discussion and proposed adoption of form NMH-3828: Civil Rights Compliance Self-Evaluation & Certification Form

Ms. Lynne Foster:

The DHCFP serves as a Civil Rights oversight agency on behalf of the U.S. Department of Health & Human Services, Office for Civil Rights and the Centers for Medicare and Medicaid Services (CMS). In this capacity, the DHCFP assures that certain entities comply with Title VI of the Civil Rights Act of 1964 (45 CFR Part 80), Section 504 of the Rehabilitation Act of 1973 (45 CFR Part 84), Title II of the Americans With Disabilities Act (ADA) of 1990, and The Age Discrimination Act of 1975 (45 CFR Parts 90 and 91). This form is used by hospitals, nursing facilities, and intermediate care facilities for individuals with intellectual disabilities that receive funding for Medicare or Medicaid for the triennial self-evaluation of compliance to those regulations.

The effective date is November 1, 2014.

At the conclusion of Ms. Foster's presentation, Ms. Moffitt asked Ms. Aiello, Deputy Administrator, and Mr. Faircloth, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Mr. Faircloth's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Moffitt – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted.

Ms. Moffitt – Closed the Public Hearing for the form NMH-3828: Civil Rights Compliance Self-Evaluation & Certification Form.

5. Discussion and proposed adoption of changes to MSM Chapter 800, Laboratory Services

Ms. Jenni Bonk:

The proposed revision to MSM Chapter 800 would refer newborn metabolic screenings to the Nevada State Public Health Laboratory, as they are now the preferred provider for the State of Nevada. There are no coverage criteria changes based upon this policy change.

The effective date is November 1, 2014.

At the conclusion of Ms. Bonk's presentation, Ms. Moffitt asked Ms. Aiello, Deputy Administrator, and Mr. Faircloth, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Mr. Faircloth's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Moffitt – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted.

Ms. Moffitt – Closed the Public Hearing for MSM Chapter 800, Laboratory Services.

6. Discussion and proposed adoption of changes to MSM Chapter 1500, Healthy Kids Program

Ms. Jenni Bonk:

Revisions to MSM Chapter 1500 are being proposed to include clarification regarding the "recommendation" vs. "requirement" for an Early Periodic Screening prior to treatment and a reorganization to improve the flow of the document; such changes include:

Further definition of Early Periodic Screenings and Comprehensive Screening Examination; clarification that a Healthy Kids screening is preferred, but not a requirement for medically necessary diagnostic and treatment services; update the reference for hearing services to MSM Chapter 2000, Audiology; reorganization of the chapter by combining the provider responsibility sections into one and eliminating the patient responsibility sections; and removal of the Clinical Studies and Experimental Treatment from the chapter and adding them as attachments.

Throughout the chapter, grammar, punctuation, and capitalization changes were made, duplications removed, acronyms used and standardized, and language reworded for clarity. Renumbering and re-arranging of sections was necessary.

The effective date is November 1, 2014.

At the conclusion of Ms. Bonk's presentation, Ms. Moffitt asked Ms. Aiello, Deputy Administrator, and Mr. Faircloth, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Mr. Faircloth's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Moffitt – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted.

Ms. Moffitt – Closed the Public Hearing for MSM Chapter 1500, Healthy Kids Program.

7. Discussion and proposed adoption of changes to MSM Chapter 1200, Prescribed Drugs

Ms. Coleen Lawrence:

Revisions to MSM Chapter 1200 are being proposed to reflect approved actions by the Drug Use Review (DUR) Board at the January 23, 2014 and April 24, 2014 meetings.

The DUR Board is a requirement of the Social Security Act (SSA) to identify and reduce fraud, abuse, overuse, and medically unnecessary care. The DUR Board also works to minimize drug interactions, drug-induced illness, and undesirable drug reactions in recipients.

Prior authorization criteria was approved by the DUR Board on January 23, 2014. Prior authorization criteria will be added, or criteria will be revised to MSM Chapter 1200 for Duexis® (famotidine/ibuprofen); Auvi-Q (epinephrine injection device); Injectable Immunomodulators; and Platelet Inhibitors. Quantity limitations will be established for promethazine with codeine.

Prior authorization criteria was approved by the DUR Board on April 24, 2014. Prior authorization will be added, or criteria will be revised to MSM Chapter 1200 for agents used for the treatment of Attention Deficit Disorder (ADD)/Attention Deficit Hyperactivity Disorder (ADHD); Olysio® (simeprevir); Sovaldi® (sofosbuvir); Synagis® (palivizumab); and proton pump inhibitors. Quantity limitations will be established for Sovaldi® (simeprevir).

New prior authorization criteria was approved by the DUR Board in a special meeting held on August 13, 2014. Prior authorization criteria was revised, based on the American Association of Pediatrics (AAP) new recommendations for Synagis® (palivizumab). Synagis® (palivizumab) is a medication used in the prevention of respiratory syncytial virus (RSV) infections in high risk infants. The new criteria removes the coverage of Synagis® (palivizumab) for preventive treatment. The Division of Health Care Financing and Policy (DHCFP) will continue to consider prior authorization approvals outside these guidelines with supporting medical documentation.

Public comment was received from AstraZeneca regarding Synagis® (palivizumab) which was read into the record by Ms. Lawrence.

At the conclusion of Ms. Lawrence's presentation, Ms. Moffitt asked Ms. Aiello, Deputy Administrator, and Mr. Faircloth, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Mr. Faircloth's Comments:

- Please confirm this same presentation from AstraZeneca regarding Synagis® was given at the DUR board when they made recommendations regarding this drug.
- Ms. Lawrence responded yes, that is correct.

Public Comments:

- Ms. Dana Lunde, a doctorally prepared neonatal nurse practitioner practicing in Las Vegas for eleven years, gave additional comment regarding the 2014 American Academy of Pediatrics (AAP) Guidelines for Synagis® use.
- Mr. Faircloth asked Ms. Lunde if she had presented this discussion to the DUR board when they developed these recommendations.
- Ms. Lunde responded no, as she was unaware of the opportunity.
- Mr. Faircloth inquired to Ms. Lunde is this discussion based on her clinical experience with this drug, and if she has a relationship with the manufacturer of this drug.
- Ms. Lunde responded the information presented is of her own independent review of the literature as well as her clinical experience with the drug and her clinical experience over the past eleven years caring for critically ill premature infants. Ms. Lunde confirmed she does not have a relationship with the manufacturer of the drug.

- Mr. Faircloth inquired to Ms. Lunde if she accepts any financial compensation from the manufacturer of the drug.
- Ms. Lunde responded no, she does not.
- Ms. Aiello commented many of Medicaid policies are based on the American Academy of Pediatrics and the DUR Board comprised of physicians and pharmacists that take into account information presented to them. They make the decisions, and I would think not lightly, when they are reviewing information. I have to defer to the physicians and the pharmacists that have been appointed to our board and who have extensive training and knowledge in medicine and reviewing medical studies. That said, we can certainly ask for this to be put on the DUR Board in the future to be re-visited. I'm going to approve the chapter as submitted but I'm going to ask that we re-agendize this issue for the DUR Board at a future meeting so that you [Ms. Lunde] have a chance to provide your public comment if you wish at that time.
- Ms. Lawrence commented this Medicaid policy does have an exception process built into it. Especially regarding children, if there are unique circumstances the provider will contact the clinical call center to work through exceptions to the AAP Guidelines as needed.

Ms. Moffitt – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted with the emphasis that there is a process in place if a physician feels there is medical necessity for a child to receive specific drugs outside of AAP Guidelines.

Ms. Moffitt – Closed the Public Hearing for MSM Chapter 1200, Prescribed Drugs.

8. Discussion and proposed adoption of changes to MSM Chapter 2500, Case Management

Ms. Alexis Tucey:

Revisions to MSM Chapter 2500 are being proposed to strengthen verbiage around documentation. Language was also clarified for coverage and limitations for transitional targeted case management services for specific targeted groups. Verbiage has been updated to change “mental retardation” to “intellectual disabilities”.

A request was made to revert to original formatting of the Chapter on pages five and six of Section 2502.

The effective date is November 1, 2014.

At the conclusion of Ms. Tucey's presentation, Ms. Moffitt asked Ms. Aiello, Deputy Administrator, and Mr. Faircloth, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Mr. Faircloth's Comments:

- No Comments

Public Comments:

- Mr. Scott Mayne of Washoe and Clark County Juvenile Services commented Section 2502 page seven, overall we support recommended changes to Chapter 2500. However item 2(b), regarding the document date, we would like clarification. Is this the service date or activity date versus the document date, because workers can sometimes get called out at the end of the day and document their services the following day. I would think we would want to capture the service date and not the document date.
- Ms. Aiello responded the standards of medical documentation require that if one were to miss documenting services on the date the services were rendered, they must then document the date the service is being documented with the notation “missed documentation” and then take note of the service rendered on the previous date of service.
- Ms. Tucey responded for clarification, we are looking for the date of service.
- Mr. Mayne commented regarding the time documentation, can it be clarified to be documenting the specific start and end time or documenting the amount of minutes spent on the particular service.
- Ms. Tucey responded either example presented would be acceptable.

Ms. Moffitt – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted.

Ms. Moffitt – Closed the Public Hearing for MSM Chapter 2500, Case Management.

General Public Comments

- No Comments

4. Adjournment

There were no further comments and Ms. Moffitt adjourned the public hearing at 10:30 AM.

**An Audio (CD) version of this meeting is available through the DHCFP Administration office. For more detailed information on any of the handouts, submittals, testimony and or comments please contact Rita Mackie at rmackie@dhcftp.nv.gov or you may call (775) 684-3681.*